63C-18-203.

Commission duties -- Reporting requirements.

- (1) (a) The commission shall:
 - (i) identify a method to integrate existing local mental health crisis lines to ensure each individual who accesses a local mental health crisis line is connected to a qualified mental or behavioral health professional, regardless of the time, date, or number of individuals trying to simultaneously access the local mental health crisis line:
 - -Require local mental health crisis lines to either:
 - 1) Staff their lines 24/7 with certified crisis workers; or
 - 2) Roll their after-hour calls to UNI for 24/7 support
 - -If a call is rolled over from a local center, the caller's number must roll over as well.
 - (ii) study how to establish and implement a statewide mental health crisis line, including identifying:
 - (A) a statewide phone number or other means for an individual to easily access the statewide mental health crisis line;
 - -Utilize LifeLine number as statewide crisis line
 - -Market LifeLine number as statewide crisis line
 - 1) Utilize state billboards
 - 2) Use state monies for other marketing
 - 3) Market with SafeUT app
 - -Use the three-digit number if/when approved and designated by Congress
 - (B) a supply of qualified mental or behavioral health professionals to staff the statewide mental health crisis line; and
 - -Allow qualified & certified bachelor's-level professionals to staff the statewide mental health crisis line
 - -Require a yearly certification for crisis line staffers
 - -The Utah Division of Substance Abuse and Mental Health will take the lead on formulating certification requirements, including subject matter and required number of certification hours
 - -The Utah Division of Substance Abuse and Mental Health shall audit the crisis centers and crisis line workers to ensure that they are in compliance with the certification requirements
 - -Training and certification will be funded through state monies

- (C) a funding mechanism to operate and maintain the statewide mental health crisis line; and
 - -Expand eligibility and covered services of Medicaid codes
 - -Open up Medicaid codes to use to cover these services
 - -State money will be needed to increase staffing for anticipated increase in call volume
- (iii) coordinate with local mental health authorities in fulfilling the commission's duties described in Subsections (1)(a)(i) and (ii).
 - -Counties & local mental health authorities were contacted and they are on board. They will be allowed to opt-out of using the state services if they already provide a 24/7 mental health line.
- (b) The commission may conduct other business related to the commission's duties described in Subsection (1)(a).
 - -Use previously purchased SafeUT Shortcode as mental health crisis text line.
 - 1) State funding is needed to cover the costs of texts.
 - 2) Market with Crisis Line and SafeUT.
 - -Offer matching state funds for local Mobile Crisis Outreach Teams as an incentive for communities to put MCOTs in place.
 - 1) MCOTs need to include a social worker and peer mentor, but a prescriber is not required
 - 2) Require that this service be covered by Medicaid and private insurers as a billable service.
- (2) Before November 30, 2017, the commission shall report to the Political Subdivisions Interim Committee regarding:
- (a) the extent to which the commission fulfilled the commission's duties described in Subsection (1); and
- (b) recommendations for future legislation related to integrating local mental health crisis lines or establishing a statewide mental health crisis line.